

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	FOAM GENERATING APPARATUS FOR BATHING AND FOAM BATH SYSTEM
Attorney Docket Number::	8069-1001
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	18
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: YOSHITERU  
Middle Name::  
Family Name:: TAKAHATA  
City of Residence:: TOYONAKA-SHI, OSAKA  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 4-4 MIYAYAMACHO 1-CHOME

City of Mailing Address:: TOYONAKA-SHI, OSAKA  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: MASAKAZU  
Middle Name::  
Family Name:: MURAKAMI  
City of Residence:: OSAKA  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 1-2, BENTEN 5-CHOME  
MINATO-KU  
City of Mailing Address:: OSAKA  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: MAMORU  
Middle Name::  
Family Name:: SAKATA  
City of Residence:: NISHINOMIYA-SHI, HYOGO  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 1-3-404 NIGAWACHO 4-CHOME

City of Mailing Address:: NISHINOMIYA-SHI, HYOGO  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: TOSHIYUKI  
Middle Name::  
Family Name:: SAWAE  
City of Residence:: HIRAKATA-SHI, OSAKA  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 21-16 KOURIENSAKURAGICHO

City of Mailing Address:: HIRAKATA-SHI, OSAKA  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::

**Correspondence Information**

Correspondence Customer 000466

Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2002-213413	7/23/02	Yes
JAPAN	2002-252541	8/30/02	Yes
JAPAN	2002-350267	12/2/02	Yes

**Assignment Information**

Assignee Name:: AQUAPRO KABUSHIKI KAISHA

Street of Mailing Address:: 1-2, BENTEN 5-CHOME  
MINATO-KU

City of Mailing Address:: OSAKA

State or Province of Mailing Address::

Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::